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-ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden

hours per form



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

Name of Offering (☐ check if this is a Debt financing	an amendment and name h	as changed, and ind	icate change.)		
Filing Under (Check box(es) that apply): □ Rule 504	□ Rule 505		☐ Section 4(6)	☐ ULOE
Type of Filing:	☐ Amendment				
	A. BASIC	IDENTIFICATION OF THE PROPERTY	ON DATA	A RICO	Creecen.
1. Enter the information requested about	out the issuer			A /	
Name of Issuer $(\square$ check if this is Synthean, Inc.	an amendment and name h	as changed, and ind	icate change.)	A DEC	15 2004
Address of Executive Offices 6300 Variel Avenue, Suite H, Wood		et, City, State, Zip (Code) Telephone 818-227-0	Number (Including Ag	ea;Code)
Address of Principal Business Operation (if different from Executive Offices)	ns (Number and Stre	et, City, State, Zip (Code) Telephone	Number (Including Ar	ea Code)
Brief Description of Business			-		\$00 to
Type of Business Organization				The state of the s	
⊠corporation ☐ business trust	☐ limited partnership, alr ☐ limited partnership, to	•	oti	her (please specify):	
	,	Month	Year		i (1)
Actual or Estimated Date of Incorporation	on or Organization:	0 2	0 0 2	Actual D Estimated	
Jurisdiction of Incorporation or Organiz	ation: (Enter two-letter U.	S. Postal Service ab	breviation for State	:	
CN for	Canada; FN for other forei	gn jurisdiction)		CA	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

· Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ☐ General and/or Managing Partner Full Name (Last name first, if individual) Klein, Moshe Business or Residence Address (Number and Street, City, State, Zip Code) c/o Synthean, Inc., 6300 Variel Avenue, Suite H, Woodland Hills, CA 91367 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Promoter ☐ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Saloner, Garth Business or Residence Address (Number and Street, City, State, Zip Code) c/o Synthean, Inc., 6300 Variel Avenue, Suite H, Woodland Hills, CA 91367 ☑ Beneficial Owner Check Box(es) that Apply: ☐ Promoter □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Toibb, Harris Business or Residence Address (Number and Street, City, State, Zip Code) c/o Synthean, Inc., 6300 Variel Avenue, Suite H, Woodland Hills, CA 91367 Check Box(es) that Apply: □ Promoter ⊠ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Dyne, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Synthean, Inc., 6300 Variel Avenue, Suite H, Woodland Hills, CA 91367 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Sgoustas, Kostas Business or Residence Address (Number and Street, City, State, Zip Code) c/o Synthean, Inc., 6300 Variel Avenue, Suite H, Woodland Hills, CA 91367 ⊠ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: ☐ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) **Eclectus Limited** Business or Residence Address (Number and Street, City, State, Zip Code) PO Box 19 Farnly House, La Charroterie, St. Peter Port, Guernsey GY13AG Channel Islands

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	□Director	☐ General and/or
Full Name (Last name first,	if individual)				Managing Partner
run Name (Last name mst,	ii iiidividuai)				
Monodux, LLC					
Business or Residence Add	ress (Number a	and Street, City, State, Zip Code)		
c/o EuroCapital Advisor	s, LLC, 15821	Ventura Blvd, Suite 525, Enc	ino, CA 94136		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number a	and Street, City, State, Zip Code)		
	(*	, , , , , , , , , , , , , , , , , , ,			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number a	and Street, City, State, Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number a	and Street, City, State, Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Puriness or Residence Add	ress (Number s	and Street, City, State, Zip Code			
Business of Residence Add	ress (Number t	and birect, city, blate, 21p code,			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number a	and Street, City, State, Zip Code))		·
	(Lica b	lank sheet, or conviand use addit	ional conies of this sheet, as	necessary)	

B. INFORMATION ABOUT OFFERING	
	Yes No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	
Answer also in Appendix, Column 2, if filing under ULOE.	
2. What is the minimum investment that will be accepted from any individual?	\$ 25,000.00
3. Does the offering permit joint ownership of a single unit?	Yes No ⊠ □
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commis-	
sion or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	<u>'</u>
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	☐ All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[ID] [MO]
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	☐ All States
	[ID] [MO]
	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Business of Residence Address (Number and Street, City, State, 21p Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
\cdot	□ All C+-+
(Check "All States" or check individual States)	☐ All States [ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	мој
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Type of Security		Aggregate fering Price	Amount Already
Debt	\$		Sold \$
Equity* * 300,000 shares of Common Stock which may be issued at a nominal purchase price	<u>\$2</u> ,	000,000.00	\$1,500,000.00
☐ Common ☐ Preferred			
Convertible Securities (including warrants)	\$ <u>2</u>	28,494.00	\$ <u>0</u>
Partnership Interests	\$_		\$
Other (Specify)			\$
Total	<u>\$2,</u>	228,494.00	\$1,500,000.00
** Warrants to purchase Common Stock and underlying securities			
Answer also in Appendix, Column 3, if filing under ULOE.			
2. Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero."	;		
Accredited Investors		Number Investors	Aggregate Dollar Amount of Purchases \$1,500,000.00
Non-accredited Investors	<u></u>		\$
Total (for filings under Rule 504 only)	<u> </u>	11	\$1,500,000.00
Answer also in Appendix, Column 4, if filing under ULOE.			
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
Type of Offering		Type of Security	Dollar Amount Sold
Rule 505			\$
Regulation A			\$
Rule 504			\$
Total		-	\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is no known, furnish an estimate and check the box to the left of the estimate.			
Transfer Agent's Fees	🗆	\$	
Printing and Engraving Costs	🛮	\$	
Legal Fees	🗵	\$20,0	00.00
Accounting Fees		\$	
Engineering Fees		\$	
Sales and Commissions (specify finders' fees separately)		\$	
Other Expenses (identify)		\$ \$	
Otter Expenses (identity)	·· ⊔		
Total	ह्य	\$ 20.0	00.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	CE, NUMBER OF INVESTORS, EXPENSES AND				
tion I and total expenses furnished in					\$ 2,208,494.00
used for each of the purposes shown. I estimate and check the box to the left of equal the adjusted gross proceeds to the	f the amount for any purpose is not known, furnish an of the estimate. The total of the payments listed must				
above.			Dowments	to	
			Officers, Directors,	&	Payments to Others
Salaries and fees					\$
Purchase of real estate			\$	_ □	\$
Purchase, rental or leasing and installat	ion of machinery and equipment		\$		\$
Construction or leasing of plant buildin	gs and facilities		\$		\$
that may be used in exchange for the	assets or securities of another issuer pursuant to a		\$		\$
- ,			\$		\$
Working capital			\$	X	\$ 2,208,494.00
Other (specify):	·		\$	_ 0	\$
			\$		\$
Column Totals			\$	0 🗆	\$
Total Payments Listed (column totals ac	dded)		×	\$2,208,4	<u>194.00</u>
	D. FEDERAL SIGNATURE	·			
ing signature constitutes an undertaking	by the issuer to furnish to the U.S. Securities and Excl	hang	e Commissio	n, upon v	
	Signature			Date	
ean, Inc.				Decem	ber , 2004
of Signer (Print or Type)	Title of Signer (Print or Type)				
as Sgoutas	Chief Operating Officer				
SATI	tion I and total expenses furnished in the "adjusted gross proceeds to the issue Indicate below the amount of the adjust used for each of the purposes shown. I estimate and check the box to the left of equal the adjusted gross proceeds to the above. Salaries and fees	tion I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Salaries and fees	tion I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Salaries and fees	tion I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments Officers Directors, Affiliates Salaries and fees	tion I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C · Question 4.b above. Payments to Officers, Directors, & Affiliates Salaries and fees

- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		ER OF INVESTORS, EXPENSES AND	USE OF P	ROCEEDS	`
5. Ind use esti	Enter the difference between the aggregate off all and total expenses furnished in response to I adjusted gross proceeds to the issuer." icate below the amount of the adjusted gross proof of for each of the purposes shown. If the amount mate and check the box to the left of the estimate all the adjusted gross proceeds to the issuer set force.	Part C - Question 4.a. This difference is seeds to the issuer used or proposed to be for any purpose is not known, furnish an ite. The total of the payments listed must			\$ 2,208,494.00
3 00			O Dire	ments to fficers, ectors, &	Payments to
Sal	laries and fees		□ \$	2011:-4	S
Pu	rchase of real estate		□ \$		S
Pu	rchase, rental or leasing and installation of machin	ery and equipment	S		□ \$
Со	enstruction or leasing of plant buildings and faciliti	es	□ \$		□ \$
	equisition of other businesses (including the value by be used in exchange for the assets or securities	•	□ \$		\$
Re	payment of indebtedness		□ \$		S
Wo	orking capital		□ \$		\$ 2.208.494.00
Otl	her (specify):		□ \$		□ \$
_			□ \$		□ \$
Со	lumn Totals		□ \$	00	□ <u>\$</u>
То	tal Payments Listed (column totals added)			≥ \$2,2	208.494.00
		D. FEDERAL SIGNATURE			
following	or has duly caused this notice to be signed by the signature constitutes an undertaking by the issue of, the information furnished by the issuer to any results.	r to furnish to the U.S. Securities and Excl	ange Com	mission, up	
	rint or Type)	Signature //		Date	2
Synthean,	, Inc.	(4)		 Dec	cember 4 , 2004
Name of S	Signer (Print or Type)	Title of Signer (Print or Type)			
Kostas S	Sgoutas	Chief Operating Officer			

- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)